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CONFIRMATION NO. 8016

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APPLICANTS

Felix Theeuwes, Los Altos Hills, CA;

James E. Brown, Los Gatos, CA;

** CONTINUING DATA *****

This application is a CON of 09/416,379 10/12/1999 PAT 6,638,263

BH4

** FOREIGN APPLICATIONS *****

NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 11/28/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	CA	12	14	1

ADDRESS

Carol L. Francis
BOZICEVIC, FIELD & FRANCIS LLP
Suite 200
285 Hamilton Avenue
Palo Alto, CA
94301

TITLE

Regulation of drug delivery through flow diversion

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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